

Best Available Copy

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AV	69801	8/4
O.I.P.E. CLASSIFIER	MNW	50	8-13-99
FORMALITY REVIEW	J.S.	69134	8-23-99

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
1	4/11/5
1	14/27/8
00	01/01/02
1	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
10	✓
11	✓
12	✓
13	✓
14	✓ ✓ ✓ ✓
15	✓
16	✓
17	✓
18	✓
19	✓
20	✓
21	✓ ✓ ✓
22	✓ ✓
23	✓ ✓
24	✓ ✓
25	✓ ✓
26	✓ ✓ ✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet